Effective on 12/08/2004.					Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).					Application Number 10/538,423				
FEE TRANSMITTAL					Filing Date 1/30/2006				
For FY 2009					lamed Inventor		a Majumder		
Applicant claims small entity status. See 37 CFR 1.27					ner Name	Rebecca E. Prouty			
						1652			
TOTAL AMOUNT OF PAYMENT (\$) 490.00				Art Ur Attorn			4544 - 051674		
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order None Other (please identify):									
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Charge rec(s) indicated below. Charge rec(s) indicated below. Charge rec(s) indicated below. Credit any overpayments									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
FILING FEES SEARCH FEES EXAMINATION FEES									
					Entity Small Entity				
Application Type				ree (\$)	<u>Fee (\$)</u>	Fee (\$)	Fees Pa	<u>aid (\$)</u>	
Utility	330	82	540	270	220	110			
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325			
Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEES								Small Entity	
Fee Description Fee (\$)								Fee (\$)	
Each claim over 20 (including Reissues) 52								26	
Each independent claim over 3 (including Reissues) 220								110	
Multiple dependent claims							390	195	
<u>Total Claims</u>	Total Claims - 20 or HP Extra Claims Fee (<u>(\$)</u>	Fee Paid (\$)		Multiple De	pendent Claims	
	20 =	0	x	=	0		<u>Fee (\$)</u>	Fee Paid (\$)	
HP = highest number	of total claims paid	for, if greater than	20.						
Indep. Claims	- 3 or HP	Extra Claims			Fee Paid (\$)				
2 -	<u>3</u> =	0	X	=	0				
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under									
37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets	Extra She			each add	itional 50 or fra	ction thereof	f Fee (\$)	Fee Paid (\$)	
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) rection 100 =									
4. OTHER FEE(S)								Fees Paid (\$)	
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): Two-Month Extension of Time Fee								\$490.00	
SUBMITTED BY									
	1/10	1 41	0 7		egistration No.	00 100	Telephone 4	12 471 0015	
(Automoty/Agent)									
Name (Print/Type	William H	. Logsdon		_	•		Date Augu	st 30, 2010	